

**Department of Social and Rehabilitation Services
FY 2011 and FY 2012 Base Budget Changes**

SRS

The FY 2011 and FY 2012 SRS Base Budget included the following adjustments:

- Non-consensus caseloads that were projected to have expenditures over the approved level were adjusted to meet the current projections.
- Provides continued funding to private hospitals for mental health inpatient care when census at the Mental Health Hospitals is too high for admissions.
- Provides funds for longevity payments for all eligible SRS staff.
- Provides funding to annualize the Money Follows the Person Program.

These additions to the base budget were accomplished through administrative cuts and efficiencies and through improved federal claiming opportunities.

In addition, the Division of Budget allocations contained additional State General Funds for:

- The June 30, 2011 end of ARRA FMAP relief. \$89 million SGF was added in FY 2012 to replace Medicaid ARRA funds.
- Increases in health insurance costs and KPERS Death & Disability for employees.

Two shortfalls are not funded within the base budget. In FY 2011, there will be a shortfall of \$14.8 million in Medicaid funding because the extended enhanced Medicaid funding approved by the federal government is less than was assumed in the FY 2011 approved state budget. In FY 2012, there is a shortfall in HCBS waivers due to the usage of one-time fee funds to cover waiver costs. These shortfalls are addressed in the agency's supplemental and enhancement requests.

State Hospitals

State Hospitals' base budget adjustments included:

- Funds for longevity payments for all eligible hospital staff.
- Used savings from the closure of the Youth Services program to fund services for youth at KVC's Wheatland program in Hays and to open an 11 bed unit for psychiatric services for adults.

The Division of Budget allocations contained additional State General Funds for:

- Increases in health insurance costs and KPERS Death & Disability for employees.

**Department of Social and Rehabilitation Services
FY 2011 Supplemental Request**

Priority	Division	Description	SGF	All Funds	FTE
1	DBHS	Replace SGF Due to Lower Extended FMAP The budget approved by the 2010 Legislature assumed that Congress would extend the ARRA FMAP for two additional quarters at the same rate as the prior year. When the extension passed, the rate was lowered for the final two quarters. This supplemental replaces this reduction in Medicaid funding with SGF dollars to continue current services.	\$14,828,378	\$0	
Total SRS FY 2011 Supplemental Request			\$14,828,378	\$0	

**Department of Social and Rehabilitation Services
FY 2012 Enhancement Requests**

Priority	Division	Description	SGF	All Funds	FTE												
1	DBHS/CSS	Replace Fee Funds in Waivers Fee funds were added to the waivers in FY2010 to cover caseload growth. These fee fund balances were one time funds available because of enhanced ARRA FMAP in the state hospitals. These funds are no longer available and must be replaced in FY2012. The amounts requested in each of the waivers are: <table><tr><td></td><td>SGF</td><td>AF</td></tr><tr><td>Developmental Disabilities</td><td>\$8,524,080</td><td>\$20,544,902</td></tr><tr><td>Technology Assisted</td><td>\$1,178,754</td><td>\$ 2,841,056</td></tr><tr><td>Traumatic Brain Injury</td><td>\$1,334,057</td><td>\$ 3,215,370</td></tr></table>		SGF	AF	Developmental Disabilities	\$8,524,080	\$20,544,902	Technology Assisted	\$1,178,754	\$ 2,841,056	Traumatic Brain Injury	\$1,334,057	\$ 3,215,370	\$11,036,891	\$26,601,328	
	SGF	AF															
Developmental Disabilities	\$8,524,080	\$20,544,902															
Technology Assisted	\$1,178,754	\$ 2,841,056															
Traumatic Brain Injury	\$1,334,057	\$ 3,215,370															
2	DBHS/MH	Restore Community Mental Health Medikan Eligibility from 12 to 24 Months With No Hardship Restores MediKan eligibility from 12 to 24 months with no hardship provision. MediKan provides a state funded safety net for persons seeking federal disability benefits that lead to Medicaid eligibility, but who are not eligible for presumptive disability. This enhancement would restore services to approximately 806 persons who lost benefits when the time limit was reduced.	\$3,371,329	\$3,371,329													
3	ISD/EES	Restore General Assistance From 12 to 24 Months With no Hardship and Restore Benefit Levels During FY 2010, the maximum months of assistance for General Assistance adults not eligible for federal disability benefits (GA Tier II adults) was reduced from 24 months to 12 months. In addition, the monthly General Assistance benefit was reduced from an average of \$160 per person to \$100. This enhancement restores the General Assistance time limit, allowing 1,393 more adults to be served, and restores the previous benefit level for all General Assistance adults.	\$4,550,106	\$4,550,106													

Priority	Division	Description	SGF	All Funds	FTE
4	DBHS/MH	Restore Mental Health Grant Reduction This enhancement would restore prior reductions taken to the Community Mental Health Center (CMHC) Grants. State grants to CMHCs, along with state aid and county funding, allow the CMHCs to serve persons who do not have the means to pay. Approximately 3,800 persons per month will be able to receive needed mental health treatment if funds are restored to this population.	\$10,983,347	\$10,983,347	
5	DBHS/CSS	Restore Developmental Disabilities Grants Reduction This enhancement request restores reductions in grant funds that support persons with developmental disabilities who are not eligible for DD Waiver services or do not need the level of support provided by the waiver. These funds also provide for services such as early childhood intervention, housing and transportation at the local community level.	\$8,088,174	\$8,088,174	
6	DBHS/AAPS	Restore Addiction and Prevention Services Grants Reduction This enhancement request reinstates state general funds that were cut from substance abuse treatment and prevention providers in FY 2010.	\$2,547,403	\$2,547,403	
7	DBHS/CSS	Restore Dental to the HCBS Waivers Dental services were eliminated from the PD, DD, and TBI waivers on January 1, 2010 due to projected over expenditures of the allocated budgets for the waivers as well as the budget circumstances in the state at that time. Restoring dental services will allow persons receiving waiver services access to necessary dental care that is not provided through the Medicaid State Plan. <div style="text-align: center;"> SGF AF Developmental Disabilities \$282,790 \$681,586 Physical Disabilities \$219,890 \$529,983 Traumatic Brain Injury \$ 19,829 \$ 47,792 </div>	\$522,509	\$1,259,361	
8	ISD/Regions	Restore Funding in Regions for SRS Direct Service Staff This enhancement adds funding for 230 positions to restore the June 2008 regional staffing level. The unrelenting caseload increases arising from the protracted recession are creating a severe strain on regional staff.	\$8,862,993	\$11,548,626	
9	ISD/RS	Restore Funding for Centers for Independent Living This enhancement restores the reduction to Centers for Independent Living. The centers assist individuals with disabilities to maintain or enhance their ability to live independently in their communities and not be required to pursue higher cost institutional care. This enhancement will restore services to as many as 2,786 persons with disabilities with the goal of maintaining or enhancing their independence.	\$321,956	\$321,956	

Priority	Division	Description	SGF	All Funds	FTE
10	DBHS/MH	Restore Mental Health Grant Funding Shifted to Medicaid Match This enhancement reinstates the reduction taken to community mental health center grants when grant funds were shifted to provide required state match for Medicaid services after the Center for Medicare and Medicaid Services (CMS) required that the use of certified match be discontinued.	\$9,191,960	\$9,191,960	
11	ISD/CFS	Restore Reduction to the Family Preservation Contracts This enhancement restores the FY 2011 reduction to the Family Preservation Program. The original reduction deprived services to 75 families. Given the contract rate increases for FY 2012, this funding will restore services to 73 families.	\$275,000	\$290,238	
12	DBHS/MH	Restore Reductions to the Mental Health Community Medication Program Restores the Mental Health Community Medication Program to previous funding levels. The Mental Health Community Medication Program pays for needed high cost mental health drugs, especially atypical antipsychotics, for persons who do not have the means to pay for them.	\$500,000	\$500,000	
13	ISD/EES	Funeral Assistance Program This enhancement funds the Funeral Assistance Program which was suspended effective FY2011. This proposed program differs from the former program by requiring funeral homes to provide discounted services as a condition of SRS providing assistance to the family in need.	\$764,047	\$764,047	
CI	Capital Improvement	Planning Money for Sexual Predator Treatment Program 90 Bed Expansion If current projections on the growth of the SPTP hold true, the total bed capacity available will be reached in FY2012. When space runs out in FY2012, program space will be temporarily converted into bed space. This request is for State Institution Building Funds (SIBF) to plan a 90 bed expansion. This is part of the Capital Improvement Budget. Estimated costs for completion of the expansion are \$19 million in FY 2012 and \$23 million in FY 2013.	\$0	\$2,659,500	
Total SRS FY2012 Enhancements			\$61,015,715	\$82,677,375	

**SRS State Hospitals
FY 2011 Supplemental Requests**

Priority	Hospital	Description	SGF	All Funds	FTE
1	OSH	OOE, Overtime, and Temporary Staff to Accommodate High Census in Osawatomie State Hospital Request funding for additional costs the state mental health hospitals experience from serving more patients than they are currently budgeted to serve.	\$670,991	\$690,991	
1	RMHF	OOE, Overtime, and Temporary Staff to Accommodate High Census in Rainbow Mental Health Facility Request funding for additional costs the state mental health hospitals experience from serving more patients than they are currently budgeted to serve.	\$545,834	\$545,834	
Total Hospital FY 2011 Supplemental Requests			\$1,216,825	\$1,236,825	

**SRS State Hospitals
FY 2012 Enhancement Requests**

Priority	Hospital	Description	SGF	All Funds	FTE
1	OSH	Open a 30 Bed Unit at Osawatomie State Hospital Funding to open a 30 bed unit at OSH to help serve the additional patients being admitted to the state mental health hospitals. State mental health hospitals are experiencing a growing number of admissions in their psychiatric services programs.	\$3,399,523	\$3,399,523	50.0
1	LSH	Staff and OOE to Open a New Sexual Predator Treatment Program 16 Bed Unit It is anticipated that the SPTP census, currently at 197, will exceed its present capacity of 201 residents by approximately January 1, 2011. This proposed expansion would provide the staff and operating expenses to operate an additional 16 bed unit.	\$1,618,823	\$1,618,823	22.0
2	LSH	Open a New Sexual Predator Transition House State law limits the number of residents in the transitional program to eight per county. As of September 14, 2010, there are eight people in the program. SRS estimates that by FY 2012 there may be as many as 12 persons in the transitional program. Therefore, funds will be needed to start-up and operate a sexual predator transition house in another county.	\$872,300	\$872,300	6.8
FY 2012 Hospital Enhancement Requests			\$5,890,646	\$5,890,646	78.8

**Department of Social and Rehabilitation Services
Proposed FY 2012 Reduced Resources**

Priority	Division	Description	SGF	All Funds	FTE
1	DBHS/CSS	Eliminate Developmental Disabilities Day and Residential Grants In FY 2010, Day and Residential and Family Support Grants were reduced by \$6.8 million. This additional reduction would eliminate the program. These grants provide supports to persons with Developmental Disabilities who are not Medicaid eligible, not DD waiver eligible, or receiving supports not otherwise provided through Medicaid or other funding sources. At this time approximately 2,450 individuals receive some level of funding from the grants. If this funding is eliminated those 2,450 individuals would be impacted.	\$(3,465,491)	\$(3,465,491)	
2	ISD/EES	Eliminate Kansas Early Head Start This proposal would eliminate the Kansas Early Head Start Program. The Kansas Early Head Start Program provides early intervention to enhance children's development during their formative years, enables parents to be better caretakers and teachers to their children, and helps parents meet their own goals, including economic independence. Grants are awarded to 13 early learning programs in 48 counties. The program serves families with incomes at or below the federal poverty level. Services to 1,117 children would be eliminated. While program elimination would save \$11.3 million, the savings are offset by the cost of child care assistance for these children.	\$(8,236,377)	\$(8,236,377)	
3	ISD/EES	Eliminate General Assistance (Maintain MediKan Mental Health) The General Assistance program is Kansas' primary safety net for 2,000 adults with disabilities living in extreme poverty. General Assistance recipients do not qualify for any other SRS program. Adults receiving General Assistance receive a \$100 monthly benefit, as well as medical assistance. This proposal would eliminate the \$100 monthly benefit, but would not affect the adult's eligibility for medical assistance.	\$(2,760,454)	\$(3,024,000)	
4	DBHS/MH	Reduce a Portion of Community Mental Health Centers' State Aid This reduced resource item would eliminate two thirds of the Community Mental Health Center's (CMHC's) state aid. CMHCs use MH State Aid funds for two primary purposes: 1) Supporting the public community mental health services infrastructure, and 2) supporting the cost of serving persons who do not have the means to pay. One major, costly component of the CMHC's infrastructure is crisis services. CMHCs are required to provide immediate response services for persons experiencing a mental health crisis. These services must be available 24 hours a day, 365 days per year. CMHCs also are expected to provide services for persons needing community mental health treatment and support who do not have the means to pay for services.	\$(6,733,519)	\$(6,733,519)	
Total Reduce Resources			\$(21,195,841)	\$(21,459,387)	

